>
0
Q
O
(1)
100 mm
()
هريسا هريسان هريسان
-
ر د د
8

	\			<u>••·</u>						10	1c	076	96	
•									7	oplication	or D	Docket Number		
PATENT APPLICATION FEE DETERMINATION RECOI									1007696					
CLAIMS AS FILED - PART I									SMALL ENTITY OTHER THAN					
(Column 1) (Column 2)									TYPE OR SMALL ENTITY					
FOR				18					RATE	FEE	4	RATE	FEE	
_				NUMBER	FILED	NUMBER EXTRA			BASIC FEE 370.00		OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS				2,2 mi	nus 20=	٠ ك			X\$ 9=		OR	ZX\$18=	36	
INDEPENDENT CLAIMS					inus 3 =	2			X42=		OR	2X84=	168	
ML	ILTIPLE DEPEN	TMBON	CLAIM P	RESENT							OR	+280=,	-	
* If the difference in column 1 is less than zero, enter "0" in notumn 2									TOTAL		OR	TOTAL	344	
CLAIMS AS AMENDED - PART II											_	OTHER		
5-20-02 (Column 1) (Column 2) (Column 3)									MALL	ENTITY	OR	SMALL		
ENT A		REM AJ	AINING FTER EDMENT		NUM PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	٠	59	Minus	** 4	۷۷	- 3>		X\$ 9=		OR	X\$18=		
AME	Independent	•	<u> </u>	Minus	***	5			X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=.		OR	+280=		
	_			•				<u> </u>	TOTAL		OR	TOTAL		
1.24.05 (Column 1) (Column 2) (Column 3)											3	addit. Fee		
		a	AIMS AINING		HIGH	EST	PRESENT			ADDI-	1		ADDI-	
AMENDMENT B		AF	TER IDMENT		PREVIO PAID	DUSLY	EXTRA	Ľ	PATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	· 1e	<u> </u>	Minus	-5	9	- /	,	(\$ 9=		OR	X\$18=	50.0	
AME	Independent)	Minus	444 _	2		7	(42 =		OR	X84=		
	FIRST PRESE	NIAIIC	N OF MC	JUIPLE DE	ENUENI	CLAIM		-	140=	•	OR	+280=		
								<u> </u>	TOTAL IT. FEE		OR	TOTAL ADDIT, FEE	50,0	
(Column 1) (Column 2) (Column 3)														
ပ		CL	AIMS AINING		HIGH	MEST MBER PRESENT			,	ADDI-			ADDI-	
AMENDMENT (AF	TER		PREVIO	CUSLY	EXTRA	F	MTE	TIONAL FEE		RATE	TIONAL FEE	
	Total	· /	19	Minus	* (c	0	•	×	C\$ 9=		OR	X\$18=		
	Independent	•	3	Minus	***	<u> </u>		7	(42=		OR	X84=		
ا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								140=	-	OR	+280=		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								TOTAL		OR	TOTAL		
***	If the "Highest Nu	mber Pro	Mously Pa	ald For IN TH	S SPACE	s less tha	n 3, enter "3."	AU 1	itT. FEE (in the ap;	propriate box		VDDIT, FEE I umn 1.		
The "Highest Number Proviously Paid For" (Total or Independent) is the highout number found in the appropriate box in column 1.														
FORM	PTO-875 (Rax 84	01)		•				Patert a	and Trades	nank Office, U.	S. DEP	ARTMENT OF	COMMERCE	